# INFORMATION COLLECTION WORKSHEET

**COMPLETE A WORKSHEET FOR EACH INFORMATION COLLECTION DOCUMENT/REQUIREMENT -** *Examples: If your information collection request (ICR) consists of three forms, complete a worksheet for each form. If your ICR consists of narratives and performance reports, complete one worksheet for narratives and another for performance reports. If your ICR is a mixture of forms and nonforms (reports, narratives, recordkeeping,etc.), complete a worksheet for each. If a reporting requirement has an associated recordkeeping requirement, you may include both on the same worksheet.*

**DOCUMENT TYPE**

☐ **FORM** ☐ **INSTRUCTION**
☐ **FORM AND INSTRUCTION** ☐ **OTHER** ______________________________

**TITLE** *(Form or Information Collection Title)*

**FORM NO.** *(If applicable)*

**AVAILABLE ELECTRONICALLY?**

☐ **YES** ☐ **NO**

**SUBMITTED ELECTRONICALLY?**

☐ **YES** ☐ **NO**

**ELECTRONIC CAPABILITY**

☐ **FILLABLE FILEABLE** ☐ **FILLABLE PRINTABLE**
☐ **FILLABLE, FILEABLE, SIGNABLE**
☐ **PAPER ONLY** ☐ **PRINTABLE ONLY**

**OBLIGATION TO RESPOND**

☐ **VOLUNTARY** ☐ **REQUIRED TO OBTAIN/RETAIN A BENEFIT** ☐ **MANDATORY**

**CFR CITATION(S)**

**IS THIS A PRIVACY ACT SYSTEM OF RECORDS?**

☐ **YES, ENTER TITLE & FR CITATION**
☐ **NO**

**TITLE**

**FR CITATION**

_____ **FR** _______________

**TOTAL NUMBER OF RESPONDENTS**

**NO. OF RESPONDENTS FOR SMALL ENTITY**

**PERCENTAGE OF RESPONDENTS REPORTING ELECTRONICALLY**

**AFFECTED PUBLIC** *(mark all that apply)*

☐ **INDIVIDUALS/HOUSEHOLDS**
☐ **FEDERAL GOVERNMENT**
☐ **STATE/LOCAL/TRIBAL GOVS**

☐ **PRIVATE SECTOR:** *(mark all that apply)*
☐ **BUSINESSES/OTHER FOR PROFITS**
☐ **FARMS**
☐ **NOT FOR PROFITS**

**FREQUENCY OF REPORTING**

☐ **DAILY** ☐ **WEEKLY** ☐ **MONTHLY**
☐ **QUARTERLY** ☐ **ANNUALLY**
☐ **SEMIANNUALLY** ☐ **BIENNIALLY**

| **RESPONDENT** *(Complete for each type of affected public marked above)* | **NO. OF RESPONDENTS (1)** | **NO. OF RESPONSES (2)** | **PER TIME PERIOD (3)** | **(4) TIME PER RESPONSE FOR REPORTING** | **(5) COST PER RESPONSE FOR REPORTING** | **(6) TIME PER RESPONSE FOR RECORDKEEPING** | **(7) COST PER RESPONSE FOR RECORDKEEPING** |
|---|---|---|---|---|---|---|---|
| **INDIVIDUALS/HOUSEHOLDS** | | | | | | | |
| **PRIVATE SECTOR** | | | | | | | |
| **STATE/LOCAL/TRIBAL GOVTS** | | | | | | | |
| **FEDERAL GOVERNMENT** | | | | | | | |

*(1) Enter number of respondents for each type of affected public.*
*(2) Enter number of responses for each type of affected public.*
*(3) Enter **BD** (Business Day (5 per week)), **BH** (Business Hour (8 per day/5 day per week)), **DEC** (Decade (1/10 per year)), **DAY** (Day (7 per week), **HR** (Hour (24 per day, 7 days per week)), **MN** ( Month (12 per year)), **QTR** (4 per year), **SA** ISemiannual (2 per year), **WK** (Week (52 per year), or YR (Year)*
*(4) Enter estimated time required to prepare each response for reporting requirements.*
*(5) Enter estimated cost for each response for reporting requirements.*
*(6) Enter estimated time per response for recordkeeping requirements.*
*(7) Enter estimated cost per response for recordkeeping requirements*

## INSTRUCTIONS FOR COMPLETING THE INFORMATION COLLECTION WORKSHEET (FWS FORM 3-2331A)

Complete a worksheet for each information collection (IC) document/requirement. Examples:

- If your information collection request (ICR) consists of three forms, complete a worksheet for each form.
- If your ICR consists of narratives and performance reports, complete one worksheet for narratives and another for performance reports.
- If your ICR is a mixture of forms and nonforms (reports, narratives, recordkeeping, etc.), complete a worksheet for each. If a reporting requirement has an associated recordkeeping requirement, you may include both on the same worksheet.

**Document Type.** Indicate whether the IC document/requirement is a form, a form and instructions, instructions only, or something else. If something else, specify; e.g., telephone survey.

**Title.** Provide a title for the IC document/requirement. If the IC is a form, use the title of the form; e.g., Information Collection Worksheet. If the IC is a reporting or recordkeeping requirement, provide a descriptive title. Be specific. Do not use a general title that does not identify the IC; e.g., Reporting Requirement. Be specific and use a title that would allow someone to find it by doing a text search; e.g., Report of Incidental Take of Marine Mammals.

**Form No.** If your IC is a form, type the form number.

**Available Electronically.** Indicate whether or not the form is available to the public electronically. If you are using a form to collect the information and it is not available electronically, you will need to explain why in item 3 of Supporting Statement A.

**Submitted Electronically.** Can the form be submitted electronically? OMB considers e-mail to be electronic submission, but not fax.

**Electronic Capability.** Select one:

- **Fillable Fileable** - can be completed online and submitted electronically.
- **Fillable Printable** - can be completed online and printed.
- **Fillable, fileable, signable** - can be completed online with electronic signature and submitted electronically.
- **Paper Only -** available in hard copy only.
- **Printable Only** - available online for printing only.

**Obligation to Respond.** Select one. If more than one category applies, you must complete a separate worksheet to account for the burden associated with each category. For example, if the requirement to complete a form is mandatory for States and private sector and voluntary for individuals, you must complete two worksheets **-** one for mandatory and one for voluntary.

- **Voluntary -** mark when the response is entirely discretionary and has no direct effect on any benefit or privilege for the respondent.
- **Required to Obtain/Retain a Benefit -** mark when the response is elective, but is required to obtain or retain a benefit.
- **Mandatory** - mark when the respondent must reply or face civil or criminal sanctions.

**CFR Citation.** If the IC is required by a statute or regulation, type the citation(s) here. If different citations apply for Affected Public, specify; e.g., 50 CFR XX.XX (States), 50 CFR XX.XX (individuals).

**Is this a Privacy Act System of Records?** Indicate "Yes" or "No."

**Title.** Enter the title and number of the privacy act system of records.

**FR Citation.** Enter the Federal Register citation for the privacy act system of records.

**Total Number of Respondents.** Enter estimated total number of annual respondents.

**No. of Respondents for Small Entity.** Of the total estimated number of annual respondents, enter the number that are small entities.

**Percentage of Respondents Reporting Electronically.** Enter estimated percentage of respondents who will report electronically. This must match item 3 of Supporting Statement A.

**Affected Public.** Mark all that apply.

**Frequency of Reporting.** Indicate frequency of reporting.

**Respondent Information.** Complete information for each type of Affected Public. Totals of information provided in this section must agree with item 12 of Supporting Statement A.

- **No. of Respondents -** enter estimated number of respondents annually.
- **No. of Responses** - enter estimated number of responses annually.
- **Per Time Period -** see instructions on worksheet.
- **Time Per Response for Reporting -** estimated time to prepare each response for reporting requirements. Note that response time includes not only the time necessary to complete the form or answer the questions, but also the time needed to read instructions, gather the information (unless it was already being gathered for other purposes), have it reviewed by lawyers or accountants, etc.
- **Cost per Response for Reporting -** enter estimated cost for each response for reporting requirements.
- **Time per Response for Recordkeeping** - enter estimated time per response for recordkeeping requirements.
- **Cost per Response for Recordkeeping** - enter estimated cost per response for recordkeeping requirements.